



PARKING CITATION ADMINISTRATIVE INVESTIGATION

This form must be submitted **within 21 days** of the date of the citation being issued or **within 14 days** from the mailing date of a notice of delinquent parking violation. **You have no right of appeal after these dates!** Vehicle Code 40215(a)

Please Print All Information

Name: _____

Citation # LG _____

Address: _____

Date Issued: _____

City: _____ State: _____ Zip: _____

Vehicle License # _____

Phone # _____

It is the responsibility of the person requesting this administrative investigation to comply with the procedures and the time limits specified in the **CITATION REVIEW PROCESS** form. Read it carefully before submitting your review request. The purpose of this investigation process is to determine if this alleged violation occurred, or if the registered owner was not responsible for the alleged violation.

Please explain your reason(s) for believing that this citation was issued in error or that you are not responsible for the alleged violation. It is important to be clear and detailed in your explanation. Use additional page(s) if necessary and attach photographs if you feel it will help prove your case. Please return both copies of this form and your citation which will be used to investigate and evaluate your appeal.

***Note:** Citations issued for failure to properly display a parking permit or a disabled parking placard will be dismissed if you provide the following: (1) Proof of valid permits or placards to the Los Gatos/Monte Sereno Police Department and (2) a reduced fee of \$10.00 for parking permits or a reduced fee of \$32.00 for disabled placard. Upon receipt of the above items you will be notified by mail of the dismissal.

I have read and understand the Citation Appeal and the Citation Review Process and certify under penalty of perjury that the information herein is true and correct.

Signed: _____ Date: _____

Do not write below this line - Official Use Only

Issuing Officer: _____ Badge #: _____ Officer Comments: _____

Investigation by _____ Date: _____ COMMENTS: _____

☐ **VALID CITATION** * *See reverse side of this form if you wish further review*

☐ **CITATION DISMISSED** * *Interest of Justice Employee/Department Error*

☐ **CITATION DISMISSED** * *Received reduced fee and proof of valid Permit or Placard*

2.0 review by:

Comments: